

15. TRINKET SNAKE (*ELAPHE HELENA*) WITH ABNORMALITIES IN VENTRAL SCALATION

(With a photo)

The serpent in question was forwarded to me by the Honorary Secretary, Mr. Humayun Abdulali, for my opinion on the abnormalities noted in the scalation over a length of 40 mm. on the anterior part of the animal.

The following extract from Mr. Abdulali's first letter dated 1st June 1957 explains the circumstances:

'A few days ago a friend brought in a trinket snake (*Elaphe helena*) which he had obtained from a madari or snake-charmer. A few inches behind the head it bore marks of an injury, in the healing of which the ventrals over a distance of about 40 mm. had been completely lost and replaced by small transverse scales!'

The above letter was accompanied by a photograph showing the



post-cranial region in a spirally twisted condition, and on the strength of this and assuming that the abnormality was, as suspected, traumatic in origin, I expressed the opinion that repair of a fairly large wound had been effected by contraction of scar tissue which had resulted in dragging down part of the lateral and dorsal scaly skin to close the gap. I did not consider that there had been any new scale-formation. My opinion was shared by my friend, Dr. Angus Bellairs, to whom I submitted the photograph.

Some time afterwards the preserved specimen was sent to me, and on examination I found that the affected area of skin had been partly dissected off. In spreading this out and studying the scalation more critically, I am now of opinion that the abnormality is probably congenital and not due to injury.

We have no positive evidence of the snake being injured. The area affected is such that the injury, if it ever occurred, must have

been an extensive one—involving removal of a relatively large slice of skin by the bite of some predator. Such an injury would almost certainly prove fatal as serpents do not recover readily on account of the slow rate of tissue growth, which leaves ample time for attack by parasites, e.g. maggots, or by ants.

Assuming, therefore, that injury had not occurred, we must fall back on the hypothesis of congenital abnormality. This is supported by the scale arrangement. At both extremities of the elliptical abnormal area are transversely disposed ventral scales of transitional size and shape. These are succeeded by small scales arranged in rather irregular transverse rows linking up on each side with normal dorsal type scales. About 19-20 ventrals are replaced by scales of abnormal size and shape. Anteriorly, the transition is less abrupt, especially on the right where five large oblong scales occur in succession, their fellows being represented by small quadrate scales, or, more posteriorly, by oval scales showing tendency to unibrication. In the caudal half of the abnormal area, small oval or quadrate scales replace the ventrals on both sides.

I therefore now consider that the error is due to abnormal development in the embryo, due to some inhibiting factor or local change of the environment of development at the time when the ventrals are being laid down.

THE ZOOLOGICAL SOCIETY OF LONDON,
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LONDON, N.W. 1,
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16. CAN SNAKES PRODUCE VOCAL SOUNDS?

Some time back the Society received the following letter from Dr. B. K. Behura, Department of Zoology, Ravenshaw College, Cuttack:

'A python (*Python molurus*) measuring about nine feet two and a half inches was kept under captivity by me at the Department of Zoology since May 1954 until its death in September 1957. On 12 April 1957 finding the water-can inside the cage of the reptile empty, I poured a glass of water into the can from above the cage, and to my surprise I heard a distinct 'Umh' resembling the sound of a man in agony. Shri U. C. Panda, a Lecturer of the Department who was standing near the cage also heard the same and we had no doubt that the sound had come from the python in the cage.